

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Commonwea of Massachus		File with: White John Clerk or Election Commission
Fill in Re	eporting Period dates: Beginning Date:	121/18 Ending Date: 12/31/19
Type of l	Report: (Check one)	RANDOLPH
8th day	y preceding preliminary Sth day preceding election	30 day after election year-end report dissolution
Disco	Candidate Jull Name (if applicable) Candidate Jull Name (if applicable) Office Sought and District Office Sought Address	Pommittee Name Name of Committee Treasurer Committee Mailing Address E-mail:
Phone # (opt	tional):	Phone # (optional):
	SUMMARY BALANC	CE INFORMATION:
	Line 1: Ending Balance from previous report	<u> </u>
	Line 2: Total receipts this period (page 3, line 11)	
	Line 3: Subtotal (line 1 plus line 2)	
	Line 4: Total expenditures this period (page 5, lin	ne 14)
	Line 5: Ending Balance (line 3 minus line 4)	
	Line 6: Total in-kind contributions this period (pa	age 6)
	Line 7: Total (all) outstanding liabilities (page 7)	
	Line 8: Name of bank(s) used:	
I certify that activity, inclifinance activ Signed unde	uding all contributions, loans, receipts, expenditures, disbursements, in-kind rity of all persons acting under the authority or on behalf of this committee for the penalties of perjury:	(Treasurer (Signature) Date:
FOR CAN	NDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 be	ox only)
I certify activity,	ate with Committee and no activity independent of the committee that I have examined this report including attached schedules and it is, to the of all persons acting under the authority or on behalf of this committee in a langulabilities nor made any expenditures on my behalf during this reporting	e best of my knowledge and belief, a true and complete statement of all campaign finance coordance with the requirements of M.G.L. c. 55. I have not received any contributions, g period.
I certify finance	ate without Committee OR Candidate with independent activity filing so that I have examined this report including attached schedules and it is, to the activity, including contributions, loans, receipts, expenditures, disbursement and finance activity of all persons acting under the authority of on behalf of the	e best of my knowledge and belief, a true and complete statement of all campaign is, in-kind contributions and liabilities for this reporting period and represents the use committee in accordance with the requirements of M.G.L. c. 55.
ned unde	er the penalties of periury:	(Candidate's signature) Date: 18/202

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

	Name and Residential Address		Occupation & Employer		
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)		
		·			
a de la companya de l					
ne 9: Total Receip	ots over \$50 (or listed above)				
ne 10: Total Recei	pts \$50 and under* (not listed above)				
ne 11: TOTAL R	ECEIPTS IN THE PERIOD		← Enter on page 1, line 2		

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
			,
ine 9: Total Receipt	s over \$50 (or listed above)		
ine 10: Total Receip	ts \$50 and under* (not listed above)		
	CEIPTS IN THE PERIOD		Enter on page 1, line 2

If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.)

report all expenditures. Please include your committee name and a page number on each page.) To Whom Paid				
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
Date Faid	(atphabettear issuing)			
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Line 12: Total Expenditures over \$50 (or listed above)				
		Line 12: Total Expenditures of	VOL WOO (OI HISTORIA GOOVE)	
	•	Line 13: Total Expenditures \$50 and under* (not listed above)		
		Line 13: 10tal Expenditures \$3	o and under (not instead above)	
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD				
	Enter on page 1, line $4 \rightarrow$		should include only those expenditu	

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

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SCHEDULE B: EXPENDITURES (continued)

	To Whom Paid	· · · · · · · · · · · · · · · · · · ·		
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
•				
	1			
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-				
		Line 12: Evnenditures even \$60) (or listed above)	
		Line 12: Expenditures over \$50	(or fisted above)	
Line 13: Expenditures \$50 and under* (not listed above)				
Enter on page 1, line 4 -> Line 14: TOTAL EXPENDITURES IN THE PERIOD If you have itemized expenditures of \$50 and under include them in line 12. Line 13 should include only those expenditures not itemized.				

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 6 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
	1			
		Line 15: In-Kind Contributions over \$50 (or listed above)		
		Line 16: In-Kind Contributions \$50 & under (not listed above)		
	Enter on page 1, line 6 →	Line 17: TOTAL IN-KIND C	ONTRIBUTIONS	

^{*} If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

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